SOLICITATION OFFERO	N/CONTRACT R TO COMPLET					LIVIO	REQUISIT 56MES-52	ION NUMBER 58-2610			PAGE	1 OF	5
2. CONTRACT NO. W911XK-05-V-00	3. AWARD/EFFECTIVE DATE 4. ORDER NUMBER					5. SOLICITATION NUMBER W911XK-05-T-0084			6. SOLICI 23-Sep	TATION ISS	UE DATE		
7. FOR SOLICITATION INFORMATION CALL	i.	a. NAME SAMMIE H	ART					b. TELEPHO 313 226-6	NE NUMBER (No 0	Collect Calls)		DUE DATE	LOCAL TIME 0 2005
9. ISSUED BY CONTRACTING DIV DETROIT DISTRICT DETROIT MI 48231-  TEL: FAX: 15. DELIVER TO DETROIT AREA OFFICE	Γ, USAED -1027	CODE V	V911XK	1	X SE X X NAICS:	S ACQUIS RESTRIC T ASIDE: SMALL B HUBZON 8(A) 517410 TANDARD	TED  100  USINESS E SMALL	% FOR	11. DELIVERY DESTINATION BLOCK IS MAR SEE SCHE	UNLESS KED EDULE CONTRACT PAS (15 CFF	12. DISC IS A RAR 700)	COUNT TE	RMS
DETROIT DISTRICT, US DETROIT MI 48209-0256	SAED 6309 W.JEFFER	SON					SEE	ITEM 9					
17a.CONTRACTOR	/OFFEROR	C	ODE 1UB81	1	18a. PA	YMENT W	ILL BE M	MADE BY		C	ODE C	RCARD	
GLOBAL COMMUNI KRIS MECHETTI 7640 OMNITECH PI VICTOR NY 14564	LACE	FAC	SILITY	F		-		EBY GOVER	RNMENT WIDE	СОМ			
TEL. (585) 742-91	REMITTANCE IS	DIFFERENT	L	1	18b. SL	JBMIT IN\	/OICES	TO ADDRE	SS SHOWN IN	BLOCK 18	a. UNLE	SS BLOC	K
SUCH ADDRE		20 001 1501 11	E OE OLIDBUIE		BELOW IS CHECKED SEE ADDENDUM  RVICES 21. QUANTITY 22. UNIT 23. UNIT PRICE 24. AMOUNT								
19. ITEM NO.		;	E OF SUPPLIE		WICLS		21	. QUANTIT		. AWARD AM			
See Schedule											,	\$2,000	
l <del> </del>	TION INCORPORA										: H		ATTACHED ATTACHED
28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETUINED TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DE SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADD SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED HEREIN.					ELIVER ALL ITEMS OFFER DATED . YOUR OFFER ON SOLICITATION								
30a. SIGNATURE OF OFFEROR/CONTRACTOR				31a.UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) 31c. DATE SIGNED									
						SH	lanor	1 Å. K	uvrena.			28-S€	ep-2005
30b. NAME AND TI	ITLE OF SIGNER		30c. DATE S	IGNED	31b.	NAME OF	CONTRAC	CTING OFFICE	ER (TYPE	OR PRINT)			
(TYPE OR PRINT)					SHARON A LAWRENCE / ADDED BY SUMI								
					TEL: (313) 226-6421 EMAIL: S								

SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITE (CONTINUED)							TEMS				PA	AGE 2 OF 5
19	19. ITEM NO. 20. SCHEDULE OF SUPPLIES/ SERVICES					l .	21. QUANTIT	ΓΥ 22. UN	T 23. UNIT	PRICE	24. AMOUNT	
15	D. ITEM NO.			•		AVICES .		21. QUANTIT	TY 22. UN	T 23. UNIT	PRICE	24. AMOUNT
_	. QUANTITY II			_								
	RECEIVED	INSPI	CTED	ACCEPTED, AND CONF	ORMS TO THE	CONTRAC	CT, EXCEPT	AS NOTED:				
32b. SIGNATURE OF AUTHORIZED GOVERNMENT 32 REPRESENTATIVE				32c. DATE		32d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE				NT		
32e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE					IVE	32f. TELEPHONE NUMBER OF AUTHORIZED GOVERNMENT REPRESENTATIVE						
32						32g. E-MAIL OF AUTHORIZED GOVERNMENT REPRESENTATIVE						
33.				35. AMOUNT VERIFIED 36 CORRECT FOR		36.	PAYMENT COMPLETI	E PARTIA	- FINAL	37. CHE	CK NUMBER	
38	PARTIAL S/R ACCOUN	FINAL F NUMB	ER 30	). S/R VOUCHER NUMBER	40. PAID BY					_	<u> </u>	
				TOOOIN NOMBER								
	41a. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMEN T42a. RECEIVED BY ( <i>Print</i> ) 41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER 41c. DATE											
41b. SIGNATURE AND TITLE OF CERTIFYING OFFICER 41c. DATE					TIO. DATE	42h RF	2b. RECEIVED AT(Location)					
42c. DATE REC'D (YY/MM/DD) 42d. TO						42d. TOTAL C	ONTAINERS					

## Section SF 1449 - CONTINUATION SHEET

FOB: Destination

	SUPPLIES/SERVICES IRIDIUM 9505A EMERGENCY KIT SATELLITE PHONE SIM Card Activation Fee \$50.00 incuded in this line item.	QUANTITY 1	UNIT Each	UNIT PRICE \$1,455.00	AMOUNT \$1,455.00
	ACRN AA Funded Amount Destination			NET AMT	\$1,455.00 \$1,455.00
ITEM NO 0002	SUPPLIES/SERVICES ACTIVATION FEE FOR SERVICE IRIDIUM 9505A	QUANTITY 1	UNIT Lump Sum	UNIT PRICE \$0.00	AMOUNT \$0.00
	ACRN AB Funded Amount			NET AMT	\$0.00 \$0.00

Page 4 of 5

ITEM NO SUPPLIES/SERVICES QUANTITY UNIT UNIT PRICE **AMOUNT** 0004 IRIPP500MV 500 1 Lump Sum \$545.00 \$545.00 MINUTES FOR 12

MONTH

NET AMT \$545.00

ACRN AB Funded Amount \$545.00

FOB: Destination

## **DELIVERY INFORMATION**

CLIN	DELIVERY DATE	QUANTITY	SHIP TO ADDRESS	UIC
0001	07-OCT-2005	1	DETROIT AREA OFFICE DETROIT DISTRICT, USAED 6309 W.JEFFERSON DETROIT MI 48209-0258 FOB: Destination	H7M0200
0002	07-OCT-2005	1	(SAME AS PREVIOUS LOCATION) FOB: Destination	H7M0200
0004	07-OCT-2005	1	(SAME AS PREVIOUS LOCATION) FOB: Destination	H7M0200

## ACCOUNTING AND APPROPRIATION DATA

96X49020000 082427 3100RF5110NA NA 96203 AA:

COST 000000000000

CODE:

AMOUNT: \$1,455.00

AB: 96X49020000 082427 2300RF5110NA NA 96203

COST 000000000000

CODE:

AMOUNT: \$545.00

## CLAUSES INCORPORATED BY REFERENCE

52.204-7	Central Contractor Registration	OCT 2003
52.212-4	Contract Terms and ConditionsCommercial Items	OCT 2003
52.212-5	Contract Terms and Conditions Required to Implement	JUL 2005
	Statutes or Executive Orders Commercial Items	